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CONFIRMATION NO. 3395

<b>SERIAL NUMBER</b> 10/679,804	<b>FILING OR 371(c) DATE</b> 10/06/2003 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2616	<b>ATTORNEY DOCKET NO.</b> I-2-0388.1US
<b>APPLICANTS</b> Teresa Joanne Hunkeler, Montreal, CANADA; Fatih Ozluturk, Port Washington, NY; ** CONTINUING DATA ***** None KTH This appln claims benefit of 60/417,088 10/08/2002 ** FOREIGN APPLICATIONS ***** None KTH				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 12/30/2003 04/11/07				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Kibrom T Haile</u> <u>KTH</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 23
			<b>INDEPENDENT CLAIMS</b> 4	
<b>ADDRESS</b> 24374				
<b>TITLE</b> Quality of service mapping between various types of wireless communication systems				
<b>FILING FEE RECEIVED</b> 1040	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	